### RECEIVED PTO-CENTRAL-FAX CENTRAL FAX CENTER

JUN 3 0 2005

Approved for use through 07/31/2006, OMB 01/51-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper	work Reduction Act of 1995, no per	sons are required to respond to a co Application Number	10/717,686	mation unless it di	SOISVS & VAIR OMES CONTIC	number.	
TO A NOTETTA !		Filing Date					
TRANSMITTAL		First Named Inventor		November 20, 2003			
FORM		Art Unit	+	Brian W. Hedrick et al.			
		Examiner Name	+	1764			
(to be used for all	correspondence after initial filing)		Jennifer A. Leung				
Total Number of P	ages in This Submission 14	Attorney Docket Number	106010-1			/	
		NCLOSURES (Check al	that apply				
Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Reply to Missing Parts/		Drawing(s)  Licensing-related Papers  Petition  Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Landscape Table on Cemarks	Address	Appeal of Appeal (Appeal (Appe	After Allowance Communication to TC  Appeal Communication to Board of Appeals and interferences  Appeal Communication to TC (Appeal Notice, Brief, Repty Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please identify below): nendment, Request and Fee Deteting erson Who is Not Inventor of the vention Now Being Claimed  edit Card Payment Form (PTO-2038)		
┌── Re	e Application ply to Missing Parts der 37 CFR 1.52 or 1.53	RE OF APPLICANT, ATTO	ORNEY, C	OR AGENT			
Firm Name	UOPLLC						
Signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
Printed name  James C. Paschall							
Date	te June 30, 2005 Reg. No. 36,8			36,887			
CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:							
Signature Deralum M. Mr. Fadden							
	Typed or printed name Geralyn M.McFadden			Date	June 30, 2005		

This collection of Information is required by 37 CFR 1.5. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, prepering, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (12-(4)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it displays a valid OMB control of the control of information unless it displays a valid OMB control of the control of information unless it displays a valid OMB control of the contro

FEE TRANSMITTAL FOR FY 2005  Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT (5) 260  METHOD OF PAYMENT (check all that apply)  Check Conditional Count Deposit Account Number Deposit Account Number Deposit Account Deposit Account Number Deposit Account Deposit Account Number Deposit Account Number Deposit Account Deposit Account Number Deposit Account Deposit Account Number Depos	Under the Panerwork Reduction	Act of 1895 r	o nersons are required t	n respond to a collec				1 CIMES COMM	minn at
FEE TRANSMITTAL For FY 2005    Applicant daims small entity status. See 37 CFR 1.27   TOTAL AMOUNT OF PAYMENT   (S) 260   Art Unit   1764   Altomey Docket No.   108010-1	Effective on 12/08/2004.			8,	Complete If Known			-1	
Applicant claims small entity status. See 37 CFR 1.27				ADDIICAUON IN		10/717,686			
Applicant daims small entity status. See 37 CFR 1.27   TOTAL AMOUNT OF PAYMENT (\$) 260   Attorney Docket No. 108010-1   METHOD OF PAYMENT (check all that apply)   Check				Filing Date		November 20, 2003			
Applicant claims small entity status. See 37 CFR 1.27   Art Unit	For FY 2005			First Named	Inventor	Brian W. Hedrick et al.			
METHOD OF PAYMENT (S) 260   Attempt Docket No.   106010-1				Examiner Na	me	Jennifer A. Leung			
METHOD OF PAYMENT (check all that apply)  Check  Credit Card  Money Order  None  Other (please identify):  Deposit Account  Deposit Account Number  Deposit Account  Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except fee(s) indicated bel	Applicant claims small en	tity status.	See 37 CFR 1.27	Art Unit		1764			
Check X Credit Card Money Order None Other (please ideatify):  Deposit Account Deposit Account Number Deposit Number Deposit Account Number Deposit Number Deposit Number Deposit Account Number Deposit Number D	TOTAL AMOUNT OF PAYME	NT (\$)	260	Attorney Doo	ket No.	106010-1			ノ
Deposit Account Deposit Account Number	METHOD OF PAYMENT (	check all t	hat apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee	Check X Credit Ca	rd $\square_{M}$	oney Order	None Othe	r (please iden	tify):			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee	Denosit Account Dep	osit Account	Number:	Depos	it Account Nan	10:			
Charge fee(s) indicated below  Charge fee(s) indicated below. Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments  Under 37 CFR 1.6 and 1.7  WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and surhorization on PTC-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity  Fee (S)  F	For the above-identifie	d deposit a	count, the Director Is	hereby authorized	i to: (check a	ill that apply	<b>'</b> )		
Uniter 37 CFR 1.16 and 1.17								or the filing	; fee
The properties of the proper		15 and 1 1	7		•		form. Provide	credit card	
BASIC FILING, SEARCH, AND EXAMINATION FEES   SEARCH FEES   SEARCH FEES   SEARCH FEES   Small Entity   Fee (\$)   Fe	information and authorization or	PTO-2038.				-			
Simal Entity   Fee (\$)   Fee (\$)									
Multiple dependent claims   Fee (\$)   Fee (\$	1. BASIC FILING, SEARC			S FARCH FEES	FXAM	INATION É	EES		
Utility   300   150   500   250   200   100	Application Type	Sı	nall Entity	Small Entit	Y	Small E	ntity	Fees Paid	(\$)
Design   200   100   100   50   130   65							24		_
Plant   200   100   300   150   160   80									_ 1
Reissue 300 150 500 250 600 300  Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	- C								
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									700
2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  50 25  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  200 100  Multiple dependent claims  Total Claims  -20 or HP = x \$50 = Fee (\$) Fee Paid (\$) Multiple Dependent Claims  -20 or HP =   x \$50 = Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20 Indep. Claims  Extra Claims  Fee (\$) Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  -100 = /50 = (round up to a whole number) x  4. OTHER FEE(\$)  Non-English Specification, \$130 fee (no small entity discount)  Other: Fee Code 1808 (\$130); Fee Code 1814 (\$130)  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)	*					• • • •	_		
Fee (S) Fee (S) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Each independent claims  Total Claims  Extra Claims  Fee (S) Fee Paid (S)  HP = highest number of total claims paid for, if greater than 20 independent claims paid for, if greater than 3  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (S)  -100 = /50 = (round up to a whole number) x  Fee Paid (S)  Fee Paid			100	0	Ū	Ū	_	Sm	all Entity
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 360 180  Multiple dependent claims  Total Claims  Extra Claims  - 20 or HP =	Fee Description							Fee (\$) F	ee (\$ :
Multiple dependent claims  Total Claims	Each claim over 20 or, for	Reissues,	each claim over 20	and more than	in the origin	nal patent	rinal natant		
Total Claims  - 20 or HP =			r Keissues, each in	dependent clain	i inore man	in the ori	zmai patent	360	
- 20 or HP =	• • ·		Fee (\$)	Fee Paid (\$)	<u>Multip</u>	le Depende	nt Claims		
Indep. Claims	- 20 or HP =				Fee	(\$)	Fee Paid (	\$1	
-3 or HP = x \$200 = HP = highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  -100 = /50 = (round up to a whole number) x  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other: Fee Code 1808 (\$130); Fee Code 1814 (\$130)  SUBMITTED BY  SIgnature  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)				Fee Paid (\$)				_	0
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)    - 100 =   /50 =   (round up to a whole number)   x   =    4. OTHER FEE(S)   Fees Paid (\$)    Non-English Specification, \$130 fee (no small entity discount)   \$260    SUBMITTED BY  Signature   Question   Registration No. (Attorney/Agent)   36,887   Telephone (847) 391-2355	- 3 or HP =		x \$200 =						
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	HP = highest number of indeper	ndent claims	paid for, if greater than 3			•			
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)	3. APPLICATION SIZE F	EE !i	wasad 100 shaats s	former the anni	lication size	fee due is	\$250 (\$12	5 for small	entity)
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof [Fee (\$)] Fee Paid (\$)  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other: Fee Code 1808 (\$130); Fee Code 1814 (\$130)  SUBMITTED BY  Signature  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)	for each additional 5	nawings c O sheets o	r fraction thereof.	See 35 U.S.C. 4	1(a)(1)(G)	and 37 CF	R 1.16(s).	J 101 D114	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other: Fee Code 1808 (\$130); Fee Code 1814 (\$130)  SUBMITTED BY Signature    Count up to a whole number) x   Fees Paid (\$)	Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount) Other: Fee Code 1808 (\$130); Fee Code 1814 (\$130)  SUBMITTED BY SIgnature Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)									
Non-English Specification, \$130 fee (no small entity discount)  Other: Fee Code 1808 (\$130); Fee Code 1814 (\$130)  SUBMITTED BY  Signature  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)									
SUBMITTED BY Signature Registration No. (Attorney/Agent) 36,887 Telephone (847) 391-2355									
Signature Registration No. (Attorney/Agent) 36,887 Telephone (847) 391-2355	Other: Fee Code 180	8 (\$130);	Fee Code 1814 (\$1	130)				\$2	60
Signature Registration No. (Attorney/Agent) 36,887 Telephone (847) 391-2355	SUBMITTED BY								
2000		cha	w			87	Telephone (	(847) 391-2	2355
				p and a second		-	Date June	30, 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.c. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to comp ete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Putent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**2**002

CERTIFICATE OF MAILING OR TRANSMISSION						
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficien: postage as first class mail on the date indicated below in an envelope addressed to Commissioner for Patents; P.O. Box 1450; Alexandria, VA 22313-1450, or facsimile transmitted to the Commissioner for Patents.						
Name (Print/Type)	Geralyn M. McFadden	Fax # (if faxed)	(703) 872-9306			
Signature	Geralyn M. Mc Fadden	Date	June 30, 2005			

## IN THE UNITED STATES PATENT AND TRADEMARK OFFIC

Appl. No.

10/717,686

Confirmation No. 9328

JUN 3 0 2005

**Applicant** 

Brian W. Hedrick

November 20, 2003

TC/A.U.

Filed

1764

Examiner

Jennifer A. Leung

Docket No.

106010-1

Customer No.

23490

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

#### AMENDMENT "A"

Sir:

In reply to the Office action of March 30, 2005, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 5 of this paper.

"Official"

#### CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail on the date indicated below in an envelope addressed to Commissioner for Patents; P.O. Box 1450; Alexandria, VA 22313-1450, or facsimile transmitted to the Commissioner for Patents.

Name (Print/Type) Geralyn M. McFadden		Fax # (703) 872-9306	
Signature	Geralun M. McJadden	Date	June 30, 2005

CENTRAL FAX CENTER

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JUN 3 0 2005

Appl. No.

10/717,686

Confirmation No. 9328

Applicant Filed Brian W. Hedrick et al. November 20, 2003

TC/A.U.

1764

Examiner

Jennifer A. Leung

Docket No. Customer No. 106010-1

Customer No. : 23490

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

# AMENDMENT, REQUEST AND FEE DELETING PERSON WHO IS NOT INVENTOR OF THE INVENTION NOW BEING CLAIMED (37 C.F.R. §1.48(b))

- 1. This amendment and request under 37 C.F.R. §1.48(b) is to delete the name of the following person named as an inventor and who is not the inventor of the invention now being claimed: **Thuy Khanh T. Nguyen**
- 2. Claims now on file: originally filed claims 1-6 and 8 as amended on June 30, 2005.
- 3. Fee (37 C.F.R. §1.17(i)—\$130.00): Authorization is hereby made to charge the amount of \$130.00 to Credit card as shown on the attached credit card information authorization form PTO-2038. Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.

Respectfully submitted,

07/01/2005 TL0111

00000004 10717686

01 FC:1808

139.00 OP

James C. Paschall Attorney for Applicants Reg. No. 36,887

(847) 391-2355 (phone) (847) 391-2387 (fax)

JCP/gm